

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) John P. Jenkins
 Name
 (2) PO Box 569
 Address (number and street)
Cross City, FL 32628
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1242506]

Submitted on:
 1/29/2021 16:56:59 (eastern)

Check here if address has changed (3) ID Number: 180

(4) Check appropriate box(es):

Candidate Office Sought: County Commissioner - District 3

Political Committee (PC) Check here if PC or ECO has disbanded

Electioneering Communications Org. (ECO) Check here if PTY has disbanded

Party Executive Committee (PTY) Check here if no other IE or EC reports will be filed

Independent Expenditure (IE) (also covers an individual making electioneering communications)

(5) Report Identifiers

Cover Period: From 10 / 30 / 2020 To 2 / 1 / 2021 Report Type: TR4

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 0 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 542 . 23

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 542 . 23

(8) Other Distributions
 \$, , 0 . 00

(9) TOTAL Monetary Contributions To Date
 \$, 5 , 520 . 00

(10) TOTAL Monetary Expenditures To Date
 \$, 5 , 520 . 00

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) _____
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X _____
 Signature

(Type name) _____
 Candidate Chairperson (only for PC and PTY)

X _____
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name John P. Jenkins (2) I.D. Number 180

10/30/2020 through 2/1/2021

(3) Cover Period _____ / _____ / _____ through _____ / _____ / _____ (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name John P. Jenkins

(2) I.D. Number 180

(3) Cover Period 10/30/2020 through 2/1/2021

(4) Page 1 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
11/4/2020 //	Whitney, Petty PO BOX 1323 Cross City, FL 32628	poll worker	MO		\$100.00
1					
11/4/2020 //	Griffis, Jacklyn 97 NE 539 ST Old Town, FL 32680	poll worker	MO		\$115.00
2					
11/4/2020 //	Purvis, Rhonda 1625 SE 317 HWY Old Town, FL 32680	poll worker	MO		\$100.00
3					
11/4/2020 //	Nease, Meagan 1625 SE 317 Hwy Old Town, FL 32680	poll worker	MO		\$100.00
4					
11/4/2020 //	Robinson, Robert PO BOX 114 Old Town, FL 32680	poll worker	MO		\$50.00
5					
1/29/2021 //	Jenkins, John P. P.O. Box 569 Cross City, FL 32628	closing account	MO		\$32.23
6					
11/30/2020 //	Drummond Bank, 1627 N Young Blvd Cheifland, FL 32626	statment fee	MO		\$5.00
7					
12/31/2020 //	Drummond Bank, 1627 N Young Blvd Cheifland, FL 32626	statement fee	MO		\$5.00
8					

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name John P. Jenkins

(2) I.D. Number 180

(3) Cover Period 10/30/2020 through 2/1/2021

(4) Page 2 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
11/9/2020 / /	Shell, 25850 SE 19 Hwy Old Town, FL 32680	gas	MO		\$30.00
9					
10/31/2020 / /	Drummond Bank, 25850 SE 19 Hwy Chiefland, FL 32626	statement fee	MO		\$5.00
10					
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